

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Golshan, Khosrow  
Title: METHOD AND APPARATUS FOR OPTICAL PROCESSING  
Appl. No.: 09/630,883  
Filing Date: 08/02/2000  
Examiner: Chang, Audrey Y.  
Art Unit: 2872  
Conf. No.: 7954

## AMENDMENT TRANSMITTAL

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[ X ] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	32	-	46	= 0	x \$52.00 = \$0.00
Independent Claims:	4	-	5	= 0	x \$220.00 = \$0.00
First presentation of any Multiple Dependent Claims:			+	\$390.00	= \$0.00
				CLAIMS FEE TOTAL	= \$0.00

[ X ] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[ X ] Extension for response filed within the first month:	\$130.00	\$130.00
[ ] Extension for response filed within the second month:	\$490.00	\$0.00
[ ] Extension for response filed within the third month:	\$1,110.00	\$0.00
[ ] Extension for response filed within the fourth month:	\$1,730.00	\$0.00
[ ] Extension for response filed within the fifth month:	\$2,350.00	\$0.00
	EXTENSION FEE TOTAL:	\$130.00
[ ] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$140.00	\$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:	\$130.00
[ ] Small Entity Fees Apply (subtract ½ of above):		\$0.00
	Extension Fees Previously Paid:	\$0.00
	TOTAL FEE:	\$130.00

The above-identified fees of \$130.00 are being paid by credit card via EFS-Web.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment instructions in EFS-Web being incorrect or absent, resulting in a rejected or incorrect credit card transaction, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 11/13/08

By /Joseph N. Ziebert/

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